SB 24 PRENATAL GATEWAY PROJECT:

LESSONS LEARNED

Today's Discussion

- ☐ Purpose & Goals of the SB 24 Project

- ☐ Background/Context

- ☐ Application Content Development

- ☐ Considerations for the AB 1296 Stakeholder Workgroup

Project Purpose & Goals

SB 24: Creation of Prenatal Gateway

Passed in 2003, SB 24 was intended to update and streamline the enrollment of both pregnant women and newborns in Medi-Cal by:

- Creating an **electronic application and enrollment process**, called the Prenatal Gateway and Newborn Gateway;

- Allowing the new PE application to serve as a **simplified application for full Medi-Cal benefits**; and

- Developing a method to **easily transmit applications to counties** for Medi-Cal determination, and any needed follow-up.

Project Goals

The Prenatal Gateway should:

- Be a simplified electronic application for the Medi-Cal program for pregnant women;

- Help beneficiaries get the most comprehensive coverage possible; and

- Balance the needs of beneficiaries, providers, counties and the state to create a successful program.

Project Scope

- This analysis addresses an array of policy and business process issues in four categories:

  - **Application content;**

  - **Application format;**

  - Internet application development; and

  - Application routing and delivery.

Methodology

- Reviewed:
  - Existing paper-based Presumptive Eligibility process;
  - Existing electronic applications for public programs;
  - Existing data delivery systems; and
  - Identified requirements for:
    - Bare minimum to start a Medi-Cal Application,
    - 200% Medical Program for Prenatal Coverage,
    - Full-scope Medi-Cal program.
- Created several optional forms for consideration.
- Interviewed more than 30 stakeholders and held three convenings to discuss findings and options.

Background

- Presumptive Eligibility Program

- Lessons Learned from CHDP Gateway

- Stakeholder Feedback

Presumptive Eligibility for Pregnant Women: *Program Overview*

- ☐ Allows qualified providers to provide low-income, pregnant women with immediate, temporary Medi-Cal coverage for certain pregnancy related and prenatal care services.

- ☐ It does not cover: labor & delivery, specialty care referral, hospitalization or acute care.

- ☐ Pregnant women can ONLY enroll and access PE benefits through a DHCS-approved PE provider.

Presumptive Eligibility for Pregnant Women: *Process*

- Step 1: Applicant enrolls at her provider's office.
    - Provider determines eligibility based on information submitted and verification of pregnancy, and
    - If eligible, she is granted prenatal PE coverage for the month of submission and the following month (up to 60 days).
- Step 2: To continue services beyond initial eligibility period, the applicant must:
    - Submit a Medi-Cal application to the county,
    - Obtain a receipt from the county verifying that an application has been submitted, and
    - Provide that receipt to her provider.
- Step 3: The provider extends applicant's PE coverage until the county makes a Medi-Cal determination.

Lessons Learned from the CHDP Gateway

- Any follow-up needed by the applicant introduces possibility of delay and confusion to the process,

- A short concise application is preferred by providers,

- Single-Point-of-Entry is not a preferred option as it is a paper based process, and

- The existing CHDP Gateway application does not provide enough information for adequate online file clearance.

Application Content:
Stakeholder Feedback

Stakeholder	Position	Rationale
Providers	Shorter Application	- Longer application could be helpful, but would ask providers to perform county's role in asking about assets. - Longer application requires more application assistance and resources, for which providers are not reimbursed. Providers will likely need funds for new training.
Advocates	Longer Application	- More women will have faster and easier access to full Medi-Cal benefits. - Additional questions should impose limited burden as most women will likely have fewer assets.
Counties	Shorter Application	- Asset screening is difficult, and better role for counties not providers. - Longer application is most likely redundant with county process for any applicant applying for full Medi-Cal benefits.

Application Content

Application Content:
Overview

At a minimum, SB 24 <u>requires</u> that the new Prenatal Gateway allow a woman to enroll in PE electronically **and** submit a Medi-Cal application to her county.

The law <u>permits</u> a longer application be created for women to be able to apply for greater levels of Medi-Cal benefits:

- **Shorter Application**: 200% program for prenatal coverage, requiring information on income disregards; or

- **Longer Application**: Full range of Medi-Cal programs, including 1931(b), requiring income disregards AND asset screening questions.

Application Content:
200% vs. Full-Scope Medi-Cal

200% Program:

- Coverage offered up to 200% of poverty;
- Covers ONLY pregnancy related services;
- Simple eligibility requirements that most closely parallels PE eligibility requirements;
- No asset questions.

- Lower administrative burden on providers (less questions); and

- Higher administrative burden on counties due to more follow-up questions.

Full-Scope/1931(b) Program:

- Coverage offered up to 100% of poverty*;
- Offers more comprehensive healthcare coverage;
- Complex eligibility requirements, more than what PE requires;

- Asset questions adds complexity for providers.
- Higher administrative burden on providers (more questions); and

- Potential for lower administrative burden on county, but process becomes more complex.

*NOTE: Under Medi-Cal, pregnant women and families are covered under the Full-Scope/1931(b) program up to 100% of poverty, as are otherwise eligible childless pregnant women in their third trimester. All eligibility rules apply, include DRA citizenship and identity documentation.

Key Principles:
Application Structure

The application questions should be structured in a way to allow for:

- ☐ Identification of different subpopulations of women coming through the prenatal gateway,

- ☐ Allow exit points for those only interested in specific programs (such as those seeking PE coverage only), and

- ☐ Minimize redundancy and time the provider needs to spend on the application.

Application Options

Create an application for:

- Bare Minimum Needed to Start a Medi-Cal App (Option A)

- Minimum Needed to determine eligibility for the 200% PE program (Option B)

- All questions needed to determine Full-Scope Medi-Cal (Option C)

Category of Questions

28 total possible questions were identified for the new electronic application and can be broken down into 4 categories:

- **Required Questions:** Basic information necessary to initiate an application

- **Income Disregard Questions:** Only asked of applicants who self-report income above the income limit and who may qualify if certain income disregards are applied,

- **Asset Screening Questions:** Asked to identify those with assets below the asset limit to minimize county follow-up, and

- **Optional Questions:** Additional information helpful for counties, but not required to initiate an application.

Application Content:
Details of the Application Options

Minimum Application PE: Time-limited benefits	<u>12 Questions</u> An electronic version of the current application for PE meets minimum requirements of SB 24.
Shorter Application 200% Program: Covers only pregnancy-related services	<u>17 Questions</u> Minimum Requirement Questions + 1 Yes/No Question: if applicant wants to be considered for Medi-Cal benefits beyond pregnancy. + 4 Income Disregard Questions *(asked only if the disregard could affect eligibility)*.
Longer Application Comprehensive Medi-Cal benefits	<u>21 Questions</u> Short Application Questions + 4 Asset Screening Questions *(short screen designed to trigger further review only if needed)*.
Other Optional Questions	<u>7 Questions</u> Can be added to either option to identify a range of special issues, such as language needs.

Application Content:
Trade-offs

	Shorter Application *Pregnancy-Related Benefits*	**Longer Application** *More Comprehensive Benefits*
Pros	- Lower redundancy with county Medi-Cal screening process. - Lower administrative burden for providers.	Could help women who have little or no assets receive full Medi-Cal benefits faster than current process.
Cons	Some eligible and needy women may not access the comprehensive Medi-Cal benefits they need.	May require additional training and resources for provider staff to collect financial information they do not currently gather.

Conclusions

The Prenatal Gateway should:

- Use the same approach as all DHCS electronic eligibility gateways to leverage economies of scale;
- Allow full flexibility for pregnant women to apply for comprehensive benefits;
- Use latest, most flexible Internet technology as long as majority of providers can participate; and
- Information should flow directly to the county to streamline enrollment and minimize administrative burden.

- RECOMMENDATION: Use the longer application

Conclusion: Take Advantage of Web-based Rules Logic

The electronic application should ask enough questions so that counties can route and enroll applicants into the most appropriate program for them. Thus, the electronic application should:

- Take into account the programs they are interested in, and allow exit points for those only interested in specific programs (such as those seeking PE coverage only),

- Give counties enough information to enroll them into the Medi-Cal program with highest level of benefits that they are eligible for with the least amount of follow-up, and

- If they are found ineligible, include a process for counties to forward their application to AIM.

Considerations for AB 1296 Stakeholder Workgroup

Lessons for AB 1296 Stakeholder Workgroup

- Map all potential questions for each program
  - Consider using SAWS2 as a starting point
- Web-based is great because it balances an applicant's individual situation with time spent:
  - Flexibility to (in real time) tailor the length of the application based on the individual's situation (way they answer the app)
- Number of screens & time is important - longer is not better (don't ask if not needed)
- Consider what percentage of the population will actually need to do the full application

Lessons for AB 1296 Stakeholder Workgroup

- Have clear goals/parameters
- Identify commonalities
- Identify opportunities to streamline the process
- Weigh the value of the optional questions to the time it takes (ask how does it help the applicant?)
- Balance what the provider does vs. the County or Exchange staff
- Consider how the application looks on paper vs. online
- Stakeholder input is important

QUESTIONS & DISCUSSION